



Dear Honorable House Human Services Committee Members:

I am writing in opposition to House Bill number 359, section 1 (Laboratory testing at individual's request). This law mandates that all laboratories in the state provide unrestricted "direct access testing" (DAT). Direct access testing is the term used by laboratorians for tests done at the request of the consumer (patient) without their physician's knowledge.

Currently 30 states have laws prohibiting or limiting DAT. Direct access testing is allowed in those states, such as Montana, that are silent on the issue. The Clinical Laboratory at Community Medical Center in Missoula and some of the other larger labs across the state offer a limited menu for DAT. A laboratory may accept this responsibility to provide the patient with convenience, cost savings, and control over their own healthcare.

The drawbacks with DAT include misinterpretation of results by the patient, potential lack of confidentiality, and increased opportunity for incompetence and fraud for out-of-state firms (Lei-Home Access HIV distributed fake HIV test kits). Patients may incorrectly assume that test results that are within range indicate no disease state and out-of-range results indicate a disease state. In addition, some tests done in a clinical laboratory or reference laboratory are "esoteric" and only a few specialized physicians may know proper interpretation.

In my opinion, the most serious problem is the lack of physician follow up in cases where treatment is essential. When a patient accepts responsibility for his or her own care the results can be disastrous. Last week an undiagnosed 28 year-old diabetic came to our direct access lab and requested serum glucose (blood sugar) then returned home. The results were extremely high and life threatening. The medical technologists referred this "panic value" to me as medical director. Fortunately I was able to contact the patient and get him to the Emergency Department before he expired.

I believe it is very important to let the hospital medical staffs and laboratory medical directors make decisions regarding those tests that can be safely offered directly to the public. Some smaller labs may not have the staffing or medical direction to safely offer any test.

Respectfully,

A handwritten signature in cursive script, appearing to read "C. Muus".

Carl J. Muus, M.D.
Medical Director,
Community Medical Center Clinical Laboratory